

Attorney Docket No. 16238-000700

DECLARATION

As a below named inventor, I declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEM AND METHOD FOR ELECTROSURGICAL CUTTING AND ABLATION.

the specification of which is attached hereto or X was filed on November 22, 1995 as Application No. 08/561,938 and was amended on (if applicable).

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56. I claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Country	Application No.	Date of Filing	Priority Claimed Under 35 USC 119
	PCT/US94/05168	May 10, 1994	Yes <u>X</u> No <u> </u>

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below:

Application No.	Filing Date
n/a	

I claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application No.	Date of Filing	Status
08/485,219	June 7, 1995	<u> </u> Patented <u>X</u> Pending <u> </u> Abandoned
08/059,681	May 10, 1993	<u> </u> Patented <u> </u> Pending <u>X</u> Abandoned
07/958,977 (now 5,366,443)	October 9, 1992	<u>X</u> Patented <u> </u> Pending <u> </u> Abandoned
07/817,575	January 7, 1992	<u> </u> Patented <u> </u> Pending <u>X</u> Abandoned

Send Correspondence to:

John T. Raffle
TOWNSEND and TOWNSEND and CREW
Stewart Street Tower
One Market Plaza, 20th Floor
San Francisco, CA 94105


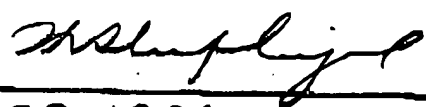
Direct Telephone Calls to:

(Name, Reg. No., Telephone No.)

Name: John T. Raffle
 Reg. No. 38,585
 Telephone: (415) 326-2400

Full Name of Inventor 1	Last Name <u>EGGERS</u> 100	First Name <u>PHILIP</u>	Middle Name or Initial <u>E.</u>	
Residence & Citizenship	City <u>Dublin</u>	State/Foreign Country <u>Ohio OH</u>	Country of Citizenship <u>U.S.A.</u>	
Post Office Address	Post Office Address <u>5366 Reserve Drive</u>	City <u>Dublin</u>	State/Country <u>Ohio</u>	Zip Code <u>43017</u>
Full Name of Inventor 1	Last Name <u>THAPLIYAL</u> 200	First Name <u>HIRA</u>	Middle Name or Initial <u>V.</u>	
Residence & Citizenship	City <u>Los Altos</u>	State/Foreign Country <u>California CA</u>	Country of Citizenship <u>U.S.A.</u>	
Post Office Address	Post Office Address <u>1192 Venti Lane</u>	City <u>Los Altos</u>	State/Country <u>California</u>	Zip Code <u>94024</u>

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1 	Signature of Inventor 2 
Philip B. Eggers	Hira V. Thapliyal
Date: <u>April 26, 1996</u>	Date: <u>Apr. 25, 1996</u>

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Attorney Docket No. 16238-000700

POWER OF ATTORNEY BY ASSIGNEE

Arthrocare Corporation is the Assignee of the invention entitled: SYSTEM AND METHOD FOR ELECTROSURGICAL CUTTING AND ABLATION, the specification of which is attached hereto or X was filed on November 22, 1995 as Application Serial No. 08/561,958.

The Assignment accompanying this Power of Attorney has been reviewed by the undersigned. The undersigned certifies that to the best of the undersigned's knowledge and belief, title is in the Assignee. The undersigned (whose title is supplied below) is empowered to act on behalf of the Assignee.

Assignee hereby appoints the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

John T. Raffle, Reg. No. 38,585
Jim Heslin, Reg. No. 29,541
Vern Norviel, Reg. No. 32,483

Send Correspondence to:

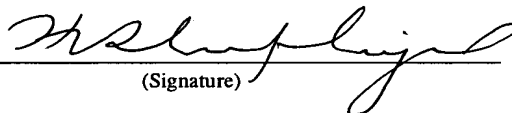
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Steuart Street Tower, 20th Floor
San Francisco, CA 94105

Direct Telephone Calls to:
(Name, reg. no., tele. no.)

John T. Raffle
Reg. No. 38,585
(415) 543-9600

Arthrocare Corporation

Date: Apr. 25, 1996

By: 
(Signature)

Name: Hira V. Thapliyal
Title: President and CEO

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(f) & 1.27(c)) - SMALL BUSINESS CONCERN

Applicant or Patentee: Phillip E. Eggers and Hira V. Thapliyal

Application or Patent No.: 08/561,958

Filed or Issued: November 22, 1995

Title: SYSTEM AND METHOD FOR ELECTROSURGICAL CUTTING AND ABLATION

I hereby declare that I am

- ☐ the owner of the small business concern identified below:
☒ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF SMALL BUSINESS CONCERN Arthrocare Corporation

ADDRESS OF SMALL BUSINESS CONCERN 5366 Reserve Drive, Dublin, Ohio, 43017

I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR 121.12, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees to the United States Patent and Trademark Office, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled SYSTEM AND METHOD FOR ELECTROSURGICAL CUTTING AND ABLATION by inventor(s) Philip E. Eggers and Hira V. Thapliyal described in

- ☐ the specification filed herewith
☒ Application No. 08/561,958, filed November 22, 1995
☐ Patent No. _____, issued _____

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights in the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern that would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

NAME _____

ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

NAME _____

ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING

Hira V. Thapliyal

TITLE OF PERSON IF OTHER THAN OWNER

President and CEO

ADDRESS OF PERSON SIGNING

1192 Volti Lane, Los Altos, California, 94024

SIGNATURE

H. Thapliyal

DATE

Apr. 25, 1996

